

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/565802

FILING DATE

APR 13 2006

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	
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49								99						
50								100						
TOTAL IND.			/					TOTAL IND.						
TOTAL DEP.			19					TOTAL DEP.						
TOTAL CLAIMS			20					TOTAL CLAIMS						

BEST AVAILABLE COPY